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Fill in this inform	ation to identify your			
Debtor 1	Adrian	Modesto	Torres	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	Northern	District of	Texas
Case number	23-41966-MXM-7			

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Describe Each Residence	ce, Building, Land, or Other Real Estate	You Own or Have ar	n Interest In
1.	Do y	ou own or have any legal or equital	ele interest in any residence, building, land, or simil	ar property?	
	₫ N	No. Go to Part 2.			
	□ Y	es. Where is the property?			
	1.1	Street address, if available, or other	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	the amount of any secur	claims or exemptions. Put red claims on Schedule D: nims Secured by Property.
		description	 ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property 	Current value of the entire property?	Current value of the portion you own?
		City State ZIP Code	Timeshare Other		your ownership interest nancy by the entireties, or
		County	Who has an interest in the property? Check one. ☐ Debtor 1 only	a me estate), ii known.	
			Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is com (see instructions)	munity property
			Other information you wish to add about this ite property identification number:		
2.			own for all of your entries from Part 1, including any number here		\$0.00
Pa	rt 2:	Describe Your Vehicles			
			nterest in any vehicles, whether they are registered vehicle, also report it on Schedule G: Executory Contra		
3.	Ca	ırs, vans, trucks, tractors, sport utili	ty vehicles, motorcycles		
		No			
		Yes			

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	3.1	Make: Me	GLES3	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
		Year:	2022 15080	☐ Debtor 1 and Debtor 2 only ✓ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage: Other information:	13000	☐ Check if this is community property (see instructions)	\$0.00	\$0.00
		Debtor, together with Recovery, LLC,holds title only. Debtor's mo equitable title by maki younger and having Only the value of Deb is shown. Estimated for \$75,000.00. VIN: 4JGFD6BB2NA7	pare legal ther holds ng all the possession. tor's interest all FMV is			
	If you	u own or have more than	one, describe	here:		
	3.2	Make: Model: 4 Compe	BMW tition Coupe	Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
		Year:	2023	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage: Other information:	6000	☐ Check if this is community property (see instructions)	\$95,000.00	\$95,000.00
		VIN: WBS33AZ00PCI	M11056			
4.	Exar	<i>mples:</i> Boats, trailers, mo No		nd other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle a		
	4.1	Make: Model:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
		Year: Other information:		☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
				☐ Check if this is community property (see instructions)		
5.			-	vn for all of your entries from Part 2, including any umber here		\$95,000.00
Pa	art 3:	Describe Your	Personal a	and Household Items		
	•	vn or have any legal or o	•	urrent value of the portion you own?		

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6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware			
		s, lumiture, linens, china, kitchenware		
	□ No		•	
	✓ Yes. Describe	See Attached.	\$1,500.00	
7.	Electronics			
		radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music tronic devices including cell phones, cameras, media players, games		
	☐ No			
	✓ Yes. Describe	See Attached.	\$1,400.00	
8.	Collectibles of value			
		gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ollections; other collections, memorabilia, collectibles		
	√ No			
	Yes. Describe			
9.	Equipment for sports and	hobbies	l	
J.		aphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and		
	kayaks; carpent	ry tools; musical instruments		
	□ No		•	
	✓ Yes. Describe	Exercise Equipment	\$300.00	
10.	Firearms		•	
	Examples: Pistols, rifles, sh	notguns, ammunition, and related equipment		
	☐ No			
	✓ Yes. Describe	See Attached.	\$600.00	
11.	Clothes			
	Examples: Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories		
	☐ No			
	✓ Yes. Describe	Clothing		
		Shoes	\$900.00	
		Designer Wear		
12.	Jewelry			
	Examples: Everyday jeweli silver	y, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,		
	☐ No			
	✓ Yes. Describe	Rolex Watch	\$8,500.00	
13.	Non-farm animals			
	Examples: Dogs, cats, bird	s, horses		
	□ No			
	✓ Yes. Describe	French Bulldog	\$600.00	

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14.	Any other personal a	nd household items you did	not already list, including any health aids y	ou did not list	
	☑ No				
	Yes. Give specific				
	information				
15.		-	rt 3, including any entries for pages you ha		\$13,800.00
Pa	rt 4: Describe	Your Financial Assets	;		
Do y	ou own or have any leç	gal or equitable interest in ar	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		ı have in your wallet, in your ho	ome, in a safe deposit box, and on hand wher	you file your petition	
	☐ No ✓ Yes			Cash:	\$500.00
17.			ounts; certificates of deposit; shares in credit of multiple accounts with the same institution, lis		
	☐ No				
	☑ Yes		Institution name:		
		17.1. Checking account:	Chase Acct #6105 (Negative Balance)		\$0.00
18.	Bonds, mutual funds,	, or publicly traded stocks			
	Examples: Bond funds	s, investment accounts with bro	okerage firms, money market accounts		
	☑ No				
	☐ Yes	Institution or issuer name:			
19.	Non-publicly traded s LLC, partnership, and	•	orated and unincorporated businesses, inc	luding an interest in an	
	☐ No				
	Yes. Give specific information about				
	them	Name of entity:		% of ownership:	
		Metroplex Mobile Diagnos	stics, LLC (Assets \$1,546.78, no debt)	100.00%	\$1,546.78
		Metroplex Recovery, LLC	(Assets \$845,935.00, Debts \$3,106,635)	100.00%	\$0.00

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20.	Government and corporate bonds and other negotiable and non-negotiable instruments						
			clude personal checks, cashiers' checks, promissory notes, and money orders. ots are those you cannot transfer to someone by signing or delivering them.				
	√ No						
	Yes. Give specific information about them	Issuer name:					
				-			
21.	Retirement or pension	accounts					
21.			1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans				
	√ No						
	Yes. List each account separately.	Type of account:	Institution name:				
		401(k) or similar plan:					
		Pension plan:					
		IRA:					
		Retirement account:					
		Keogh:					
		Additional account:					
		Additional account:					
22.	Security deposits and	nrenayments					
			de so that you may continue service or use from a company				
	Examples: Agreements others	s with landlords, prepaid	I rent, public utilities (electric, gas, water), telecommunications companies, or				
	√ No						
	☐ Yes	In	stitution name or individual:				
		Electric:					
		Gas:					
		Heating oil:					
		Security deposit on rer	ntal unit:				
		Prepaid rent:					
		Telephone:					
		Water:					
		Rented furniture:					
		Other:					

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23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ✓ No	
	Yes Issuer name and description:	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	✓ No ☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	☑ No	
	Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	✓ No ☐ Yes. Give specific	
	information about them	
Mone	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether you	
	already filed the returns and the tax years	
	Local:	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	

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	₫ No			
	☐ Yes. Give specific information		Alimony:	
				noo:
			Maintena	nice.
			Support:	
			Divorce s	ettlement:
			Property	settlement:
30.	Other amounts someone owes you			
	Examples: Unpaid wages, disability insu Social Security benefits; unpaid	rance payments, disability benef aid loans you made to someone		mpensation,
	☑ No			
	☐ Yes. Give specific information			
31.	Interests in insurance policies			
	Examples: Health, disability, or life insura	nce; health savings account (HS	SA); credit, homeowner's, or renter's in:	surance
	☑ No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
		-		
32.	Any interest in property that is due you If you are the beneficiary of a living trust,		rance policy or are currently entitled to	a receive
	property because someone has died.	expect proceeds from a life insul	rance policy, or are currently entitled to	Teceive
	√ No			
	☐ Yes. Give specific information			
33.	Claims against third parties, whether o	r not you have filed a lawsuit o	or made a demand for payment	
	Examples: Accidents, employment dispu	tes, insurance claims, or rights t	o sue	
	☑ No			
	Yes. Describe each claim			
34.	Other contingent and unliquidated clai claims	ms of every nature, including	counterclaims of the debtor and rig	hts to set off
	☑ No			
	Yes. Describe each claim			
35.	Any financial assets you did not alread	y list		
	☑ No			
	☐ Yes. Give specific information			

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36.		dollar value of all of your entries from Part 4, including any entries for pages you have attached 4. Write that number here	\$2,046.78
Pa	rt 5:	Describe Any Business-Related Property You Own or Have an Interest In. List an	y real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related property?	
	√ No. 0	Go to Part 6.	
	Yes.	Go to line 38.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Account	s receivable or commissions you already earned	
	√ No		
	☐ Yes.	Describe	\neg
39.	Office ed	quipment, furnishings, and supplies	
	Example	s: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, cha electronic devices	irs,
	√ No		
	Yes.	Describe	
40.	Machine	ry, fixtures, equipment, supplies you use in business, and tools of your trade	
	√ No		
	☐ Yes.	Describe	
41.	Inventor	у	
	√ No		
	Yes.	Describe	
42.	Interests	s in partnerships or joint ventures	
	√ No		
	Yes.	Describe	
		Name of entity: % of ownership:	
			_
43.		er lists, mailing lists, or other compilations	
	√ No		
	Yes.	Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
		□ No	-
		Yes. Describe	
			_

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44.	Any business-related pr	operty you did not already list	
	☑ No		
	Yes. Give specific information		
	•		
	•		
45.		all of your entries from Part 5, including any entries for pages you have attached nber here	\$0.00
Pa	ι Ο.	ny Farm- and Commercial Fishing-Related Property You Own or Have an have an interest in farmland, list it in Part 1.	Interest In.
46.	Do you own or have any	legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.		
	Yes. Go to line 47.		
			Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
47.	Farm animals		
	Examples: Livestock, po	ultry, farm-raised fish	
	☑ No		
	☐ Yes		
48.	Crops—either growing	or harvested	
	☑ No		
	Yes. Give specific		
	information		
49.	Farm and fishing equip	nent, implements, machinery, fixtures, and tools of trade	
	√ No		
	☐ Yes		
50.	Farm and fishing suppli	es, chemicals, and feed	
	√ No		
	☐ Yes		
51.	Any farm- and commerc	ial fishing-related property you did not already list	
	₫ No		
	Yes. Give specific		
	information		

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52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ✓ No ☐ Yes. Give specific	
	information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
Pa	rt 8: List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	\$0.00
56.	Part 2: Total vehicles, line 5 \$95,000.00	
57.	Part 3: Total personal and household items, line 15 \$13,800.00	
58.	Part 4: Total financial assets, line 36 \$2,046.78	
59.	Part 5: Total business-related property, line 45 \$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52 \$0.00	
61.	Part 7: Total other property not listed, line 54 + \$0.00	
62.	Total personal property. Add lines 56 through 61	+\$110,846.78
63.	Total of all property on Schedule A/B. Add line 55 + line 62.	\$110,846.78

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	Continuation Page		
6.	Household goods and furnishings		
	Bedroom Furniture	-	\$1,000.00
	Living Room Furniture	-	\$500.00
7.	Electronics		
	Audio Equip		\$100.00
	Cell Phone	-	\$500.00
	Computer		\$500.00
	Television		\$300.00
10.	Firearms		
	9MM		\$300.00
	Beretta 9 mm		\$300.00

Case 2	23-41966-mx		Filed 08/0 Document		Entered 12 of 59		3 17:53:4	3 D	esc Main	
Fill in this information	to identify your cas	se:								
Debtor 1	Adrian	Modesto	Torres							
Debtor 2	First Name	Middle Name	Last Name							
(Spouse, if filing)	First Name	Middle Name	Last Name							
United States Bankr	uptcy Court for the	: <u> </u>	Northern District o	of Texas						
Case number (if known)	23-41966-N	MXM-7							eck if this is an ended filing	
Official Form	106C									
Schedule C	C: The Pro	operty Yo	u Claim a	as Ex	cempt					04/22
Be as complete and a property you listed on out and attach to this known).	Schedule A/B: Pr	operty (Official Forr	m 106A/B) as you	r source, l	ist the prope	rty that you	claim as exen	pt. If m	ore space is n	eeded, fill
For each item of proper amount as exempt. Also Some exemptions—so However, if you claim property is determined	ternatively, you ma uch as those for h an exemption of 1	ay claim the full fair ealth aids, rights to 00% of fair market v	market value of to receive certain by value under a law	he proper penefits, a that limits	ty being exer and tax-exem a the exempti	mpted up to pt retiremen ion to a parti	the amount of t funds—may cular dollar a	f any ap be unli	plicable statut mited in dolla	ory limit. amount

Part 1: Identify the Property You Claim as Exempt Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: Tex. Prop. Code §§ 42.001(a), \$95,000.00 2023 BMW 4 Competition Coupe ☐ 100% of fair market value, up 42.002(a)(9) VIN: WBS33AZ00PCM11056 to any applicable statutory limit Line from Schedule A/B: Brief description: \$0.00 Tex. Prop. Code §§ 42.001(a). \$0.00 2022 Mercedes-Benz GLES3 ☐ 100% of fair market value, up 42.002(a)(9) VIN: 4JGFD6BB2NA742977 Debtor, together with to any applicable statutory limit Metroplex Recovery, LLC, holds bare legal title only. Debtor's mother holds equitable title by making all the payments and having possession. Only the value of Debtor's interest is shown. Estimated full FMV is \$75,000.00. I ine from Schedule A/B:

Document Page 13 of 59 Debtor 1 Case number (if known) 23-41966-MXM-7 Adrian Modesto **Torres** First Name Middle Name Last Name Part 2: Additional Page 3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) **√** No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No

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Yes

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Debtor 1 Adrian Modesto Torres Case number (if known) 23-41966-MXM-7
First Name Middle Name Last Name

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:		⊠ \$500.00	T
Living Room Furniture	\$500.00		Tex. Prop. Code §§ 42.001(a).
Line from Schedule A/B:6_		☐ 100% of fair market value, up to any applicable statutory limit	42.002(a)(1)
Brief description:		√ \$1,000,00	
Bedroom Furniture	\$1,000.00	<u> </u>	Tex. Prop. Code §§ 42.001(a).
Line from Schedule A/B: 6		☐ 100% of fair market value, up to any applicable statutory limit	42.002(a)(1)
Brief description:		-4	
Television	\$300.00	\$300.00	Tex. Prop. Code §§ 42.001(a),
Line from Schedule A/B: 7		☐ 100% of fair market value, up to any applicable statutory limit	4 2.002(a)(1)
Brief description:		,	
Audio Equip	\$100.00	√ \$100.00	Tex. Prop. Code §§ 42.001(a),
Line from Schedule A/B: 7		☐ 100% of fair market value, up to any applicable statutory limit	42.002(a)(1)
Brief description:		-	
Computer	\$500.00	\$500.00	Tex. Prop. Code §§ 42.001(a).
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	42.002(a)(1)
Brief description:			
Cell Phone	\$500.00	\$500.00	Tex. Prop. Code §§ 42.001(a),
Line from Schedule A/B:7		100% of fair market value, up to any applicable statutory limit	42.002(a)(1)
Brief description:		_1	
Exercise Equipment	\$300.00	\$300.00	Tex. Prop. Code §§ 42.001(a).
Line from Schedule A/B: 9	_	☐ 100% of fair market value, up to any applicable statutory limit	42.002(a)(8)
Brief description:			
Beretta 9 mm	\$300.00	\$300.00	Tex. Prop. Code §§ 42.001(a).
Line from Schedule A/B: 10		100% of fair market value, up to any applicable statutory limit	42.002(a)(7)
Brief description:		-	
9MM	\$300.00	\$300.00	Tex. Prop. Code §§ 42.001(a).
		100% of fair market value, up	42.002(a)(7)
Line from Schedule A/B: 10		to any applicable statutory limit	

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Debtor 1	Adrian	Modesto	Torres	Case number	er (if known) <u>23-41966-MXM-7</u>
	First Name	Middle Name	Last Name		
Part 2: Addi	tional Page				
•	on of the property a hat lists this prope		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
Clothing Shoes Line from Schedule A/B:	n: s Designer Wear		\$900.00	\$900.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)
Brief description Rolex Watch Line from Schedule A/B:	n: 		\$8,500.00	\$8,500.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a). 42.002(a)(6)
Brief description French Bulldog Line from Schedule A/B:			\$600.00	\$400.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(11)

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FORT WORTH DIVISION

IN RE: Torres, Adrian Modesto CASE NO 23-41966-MXM-7

CHAPTER Chapter 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: State

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicle	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 \$0.00
3. 4.	Watercraft, trailers, motors	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	homes, and accessories	φυ.υυ	φ0.00	φυ.υυ	φυ.υυ	φ0.00
6.	Household goods and furnishings	\$1,500.00	\$0.00	\$1,500.00	\$1,500.00	\$0.00
7.	Electronics	\$1,400.00	\$0.00	\$1,400.00	\$1,400.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$300.00	\$0.00	\$300.00	\$300.00	\$0.00
10.	Firearms	\$600.00	\$0.00	\$600.00	\$600.00	\$0.00
11.	Clothes	\$900.00	\$0.00	\$900.00	\$900.00	\$0.00
12.	Jewelry	\$8,500.00	\$0.00	\$8,500.00	\$8,500.00	\$0.00
13.	Nonfarm animals	\$600.00	\$0.00	\$600.00	\$400.00	\$200.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$500.00	\$0.00	\$500.00	\$0.00	\$500.00
17.	Deposits of money	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$1,546.78	\$0.00	\$1,546.78	\$0.00	\$1,546.78
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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FORT WORTH DIVISION

IN RE: Torres, Adrian Modesto

CASE NO 23-41966-MXM-7

CHAPTER Chapter7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: State

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTALS:	\$15,846.78	\$0.00	\$15,846.78	\$13,600.00	\$2,246.78

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FORT WORTH DIVISION

CASE NO IN RE: Torres, Adrian Modesto

> CHAPTER Chapter7

23-41966-MXM-7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
Real Property			
(None)			
Personal Property			
(None)			
TOTALS:	\$0.00	\$0.00	\$0.00

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property				
(None)				
Personal Property				
French Bulldog	\$600.00		\$600.00	\$200.00
Cash	\$500.00		\$500.00	\$500.00
Metroplex Mobile Diagnostics, LLC (Assets \$1,546.78, no debt)	\$1,546.78		\$1,546.78	\$1,546.78
TOTALS:	\$15.846.78	\$0.00	\$15.846.78	\$2.246.78

Summary						
A. Gross Property Value (not including surrendered property)	\$15,846.78					
B. Gross Property Value of Surrendered Property	\$0.00					
C. Total Gross Property Value (A+B)	\$15,846.78					
D. Gross Amount of Encumbrances (not including surrendered property)	\$0.00					
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00					
F. Total Gross Encumbrances (D+E)	\$0.00					
G. Total Equity (not including surrendered property) / (A-D)	\$15,846.78					
H. Total Equity in surrendered items (B-E)	\$0.00					
I. Total Equity (C-F)	\$15,846.78					
J. Total Exemptions Claimed	\$13,600.00					
K. Total Non-Exempt Property Remaining (G-J)	\$2,246.78					

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			Document	Page 19 of 59)		
Fill in this information	to identify your case:						
Debtor 1	Adrian First Name	Modesto Middle Name	Torres Last Name	_			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankr	uptcy Court for the:		Northern District of	f Texas			
Case number (if known)	23-41966-MX	<u>M-7</u>				Check if amended	
Official Form	106D						
Schedule [D: Creditor	s Who H	łave Clair	ns Secured	d by Prope	erty	12/15
☑ Yes. Fill in all of	ve claims secured by	rm to the court w		dules. You have nothin	g else to report on th	nis form.	
separately for ea	claims. If a creditor ha ch claim. If more than 2. As much as possibl	one creditor has	s a particular claim,	list the other	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 BMW Financial Streditor's Name Attn: Customer / 1400 City View I Number Stre Columbus, OH 4 City Who owes the definition of the columbus of of th	Accounting Drive eet 43215 State ZIP Code ebt? Check one.	As of the capply.	dated	oupe	\$120,801.00	\$95,000.00	<u>\$25,801.00</u>
☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and ☐ At least one o		√ 1 An agr	ed lien. Check all that eement you made (ured car loan)				

 \square Statutory lien (such as tax lien, mechanic's

Last 4 digits of account number 8 4 1 4

☐ Judgment lien from a lawsuit

Add the dollar value of your entries in Column A on this page. Write that number here:

Other (including a right to offset)

☐ Check if this claim relates to a

community debt

Date debt was incurred

1/7/2023

\$120,801.00

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Debtor 1 Modesto **Torres** Case number (if known) 23-41966-MXM-7 Adrian First Name Middle Name Last Name Column A Column B Column C Additional Page Unsecured Amount of claim Value of Part 1: After listing any entries on this page, number them beginning with collateral that portion Do not deduct the 2.3, followed by 2.4, and so forth. supports this If any value of claim collateral. Truist Bank \$90.984.00 \$0.00 \$90.984.00 Describe the property that secures the claim: Creditor's Name 2022 Mercedes-Benz GLES3 Po Box 1847 Debtor, together with Metroplex Recovery, LLC, holds Number Street bare legal title only. Debtor's mother holds equitable title by making all the payments and having Newport News, VA 23601-0847 possession. Only the value of Debtor's interest is State ZIP Code shown. Estimated full FMV is \$75,000.00. Who owes the debt? Check one. **✓** Debtor 1 only As of the date you file, the claim is: Check all that Debtor 2 only Contingent Debtor 1 and Debtor 2 only Unliquidated At least one of the debtors and Disputed another Check if this claim relates to a Nature of lien. Check all that apply. community debt ✓ An agreement you made (such as mortgage) or secured car loan) Date debt was incurred ☐ Statutory lien (such as tax lien, mechanic's 5/14/2022 lien) ☐ Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 1 0 0 1 Add the dollar value of your entries in Column A on this page. Write that number here: \$90,984.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number \$211,785.00

Case	23-41966-mxm	7 Doc 25	Filed 08/01/23	Entered	08/01/23	17:53:43	3 Desc	: Main	
Fill in this information	to identify your case:								
Debtor 1	Adrian	Modesto	Torres						
Dobtor !	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankı	ruptcy Court for the:	N	orthern District of Texas						
Case number	23-41966-MXN	И-7				[☐ Check i	f this is an	
(if known)							amende	ed filing	
~ · · · · -	4005/5	-			l				
Official Form	106E/F								
Schedule E	E/F: Credito	ors Who I	Have Unsecu	ired CI	aims				12/15
party to any executor 06A/B) and on Scheure listed in Schedule the boxes on the left.	y contracts or unexpir dule G: Executory Cor D: Creditors Who Ho	red leases that contracts and Unexp Id Claims Secured on Page to this pa	litors with PRIORITY clair uld result in a claim. Also oired Leases (Official Forr d by Property. If more spa age. On the top of any add	list executory n 106G). Do n ace is needed,	y contracts on a ot include any copy the Part	Schedule A creditors w you need, f	/B: Property ith partially ill it out, nur	y (Official Fo secured cla mber the en	orm aims that
No. Go to P Yes. List all of your p claim listed, ider amounts. As mu fill out the Contir	priority unsecured claintify what type of claim ich as possible, list the nuation Page of Part 1.	ms. If a creditor hat it is. If a claim has claims in alphabet If more than one	as more than one priority to both priority and nonprioritical order according to the creditor holds a particular tions for this form in the in	rity amounts, li e creditor's nar claim, list the	ist that claim he me. If you have other creditors i	re and show more than t	v both priori	ty and nonp	riority
						Total claim	Priority amount	Nonprio	
2.1 Christan Tori	rae		Land A. Hallanda of an annual o			\$22,000.0			\$0.00
Priority Creditor's			Last 4 digits of account r When was the debt incur						
524 Stone Cr Number	ossing Lane Street		As of the date you file, th	-					
Fort Worth, T			apply. Contingent						
City	State	ZIP Code	☐ Unliquidated						
Who incurred ☑ Debtor 1 o	the debt? Check one.		☐ Disputed						
Debtor 2 o	•		Type of PRIORITY unsec						
Debtor 1 a	and Debtor 2 only		Domestic support oblTaxes and certain oth	· ·	owo tho				
	ne of the debtors and a		government	•					
	his claim is for a comn ubject to offset?	nunity debt	☐ Claims for death or powere intoxicated	ersonal injury	while you				
✓ No	ibject to onset?		Other. Specify						
☐ Yes									
2.2 Internal Reve	enue Service		Last 4 digits of account r	number		\$5,526.4	4 \$5,520	3.44	\$0.00
Priority Creditor's	s Name		When was the debt incur						
P.O. Box 734 Number	6 Street		As of the date you file, th	e claim is: Ch	eck all that				
	, PA 19101-7340		apply. Contingent						
City	State	ZIP Code	☐ Unliquidated						
Who incurred ☑ Debtor 1 o	the debt? Check one.		☐ Disputed						
Debtor 1 c	•		Type of PRIORITY unsec						
	and Debtor 2 only		Domestic support obl	-					
At least or	ne of the debtors and a		Taxes and certain oth government	er debts you o	owe the				
	his claim is for a comm	nunity debt	Claims for death or po	ersonal injury	while you				
Is the claim su ☑ No	ubject to offset?		were intoxicated Other. Specify						
☐ Yes			Speeding						

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listing any entries on this page, number them beg	inning with 2.3, followed by 2.4, and so forth.		riority mount	Nonpriority amount
Priority Creditor's Name PO Box 830794 Number Street Birmingham, AL 35283-0794 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	<u>\$27,020.00</u>	\$27,020.C	<u>00</u> \$0.0
US Department of the Treasury Priority Creditor's Name PO Box 830794 Number Street Birmingham, AL 35283-0794 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? ✓ No	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	<u>\$13,367.00</u>	\$13,367.C	00\$0.0

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☐ Contingent

Unliquidated

■ Student loans

similar debts

☐ Other. Specify

Disputed

As of the date you file, the claim is: Check all that apply.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other

Type of NONPRIORITY unsecured claim:

Number

☑ No Yes

Street

Who incurred the debt? Check one.

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

State

ZIP Code

Louisville, KY 40290

☑ Debtor 1 only

☐ Debtor 2 only

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Case number (if known) 23-41966-MXM-7

First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Cor	ntinuation Page	
After listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim
AMA Recovery Group Nonpriority Creditor's Name 3131 Eastside St #350 Number Street Houston, TX 77098 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - Legend Advance	unknown
Antonio Chavez Nonpriority Creditor's Name 12801 N Central Expressway St 260 Number Street Dallas, TX 75243 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	unknown

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$8.199.00 4.5 Apple Card/GS Bank USA Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? Lockbox 6112 P.O. Box 7247 As of the date you file, the claim is: Check all that apply. Number Street Contingent Philadelphia, PA 19170 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only □ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or ■ At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts Is the claim subject to offset? $\sqrt{}$ Other. Specify **☑** No **Credit Card** ☐ Yes unknown 4.6 **CESC** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 14925 Kinsport Rd As of the date you file, the claim is: Check all that apply. Number Street Contingent Fort Worth, TX 76155 City ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or ☐ At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$74,602.00 4.7 **CIT First Citizens Bank** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? P.O. Box 856502 As of the date you file, the claim is: Check all that apply. Number Contingent Minneapolis, MN 55485 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only □ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or ■ At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\sqrt{}$ Other, Specify **☑** No **Business Debt** ☐ Yes \$160,000.00 4.8 **CIT First Citizens Bank** Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? P.O. Box 856502 As of the date you file, the claim is: Check all that apply. Number Street Contingent Minneapolis, MN 55485 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No **Business Debt**

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$1,590.00 4.9 Citi Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? PO Box 6243 As of the date you file, the claim is: Check all that apply. Number Street Contingent Sioux Falls, SD 57117 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or ☐ At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No **Credit Card** ☐ Yes \$12,000.00 4.10 Citi Card Bank Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? PO Box 6241 As of the date you file, the claim is: Check all that apply. Number Street Contingent Sioux Falls, SD 57117 **ZIP** Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$

Other. Specify

Credit Card

✓ No

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$16,054.00 4.11 Citicards CBNA Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6241 As of the date you file, the claim is: Check all that apply. Number Street Contingent Sioux Falls, SD 57117 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No **Credit Card** ☐ Yes \$14,355.00 4.12 **Discover Bank/Discover Products Inc** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? PO Box 3025 As of the date you file, the claim is: Check all that apply. Number Street Contingent New Albany, OH 43054 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify

Credit Card

✓ No

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First Name Middle Name Last Name

Part	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page				
Afte	listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim		
4.13	Empire Recovery Nonpriority Creditor's Name 10 W. 37th St SE RM 602 Number Street New York, NY 10018 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Collecting for - Legend Advance Funding	<u>unknown</u>		
4.14	Exxon Mobile Nonpriority Creditor's Name P.O. Box 6293 Number Street Carol Stream, IL 60197 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	<u>\$8,669.00</u>		

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First Name Middle Name Last Name

Part 2	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page				
After	Total claim				
4.15	Florida Power & Light Nonpriority Creditor's Name 4200 W Flagler St RRD/LFO-BKY Number Street Miami, FL 33134 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Utilities	\$233.00		
4.16	Ford Motor Credit Nonpriority Creditor's Name PO Box 650575 Number Street Dallas, TX 75265 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	<u>\$14,312.00</u>		

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First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$14,661.00 4.17 **Ford Motor Credit** Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? PO Box 650575 As of the date you file, the claim is: Check all that apply. Number Street Contingent **Dallas, TX 75265** City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **✓** No ☐ Yes unknown 4.18 Friedman Suder and Cooke Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 604 E 4th Street Ste 200 As of the date you file, the claim is: Check all that apply. Number Street Contingent Fort Worth, TX 76102 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No

Attorney for - Sun Valley Industrial Park

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$15,947.00 4.19 Helzberg Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? P.O. Box 182789 As of the date you file, the claim is: Check all that apply. Number Street Contingent Columbus, OH 43218 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No **Credit Card** ☐ Yes \$127,028.00 4.20 Legend Advance Funding II LLC Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 10 W 37th St Rm 602 As of the date you file, the claim is: Check all that apply. 800 Brickell Ave 902 Contingent Number Street Unliquidated Miami, FL 33131 ZIP Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts ☐ Check if this claim is for a community debt $\mathbf{\Lambda}$ Other. Specify Is the claim subject to offset? **Business Debt ☑** No

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First Name Middle Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$59,707.00 4.21 **Mercedes Benz Financial** Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Street Contingent Chicago, IL 60656 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify **☑** No **Business Debt** ☐ Yes \$27,810.00 4.22 **Mercedes Benz Financial** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Number Street Contingent Chicago, IL 60656 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No

Business Debt

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First Name Middle Name Last Nam

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$39,264.00 4.23 **Mercedes Benz Financial** Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Street Contingent Chicago, IL 60656 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify **☑** No **Business Debt** ☐ Yes \$35,640.00 4.24 **Mercedes Benz Financial** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Number Street Contingent Chicago, IL 60656 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No **Business Debt**

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$33,070.00 4.25 **Mercedes Benz Financial** Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Street Contingent Chicago, IL 60656 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify **☑** No **Business Debt** ☐ Yes \$39,259.00 4.26 **Mercedes Benz Financial** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Number Street Contingent Chicago, IL 60656 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No **Business Debt**

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First Name Middle Name Last Nam

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$59,707.00 4.27 **Mercedes Benz Financial** Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Street Contingent Chicago, IL 60656 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify **☑** No **Business Debt** ☐ Yes \$27,727.00 4.28 **Mercedes Benz Financial** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Number Street Contingent Chicago, IL 60656 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No **Business Debt**

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$37,547.00 4.29 **Mercedes Benz Financial** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 5450 N Cumberland Ave As of the date you file, the claim is: Check all that apply. Street Contingent Chicago, IL 60656 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify **✓** No **Business Debt** ☐ Yes \$111,470.00 4.30 **National Funding** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 9530 Towne Centre Dr As of the date you file, the claim is: Check all that apply. Number Street Contingent San Diego, CA 92121 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No **Business Debt**

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$350.00 4.31 One Advantage Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? 1232 W State Road 2 As of the date you file, the claim is: Check all that apply. Street Contingent La Porte, IN 46350-5469 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No Medical ☐ Yes \$8,237.00 4.32 Patient Fi Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 6009 S Sharan Ave As of the date you file, the claim is: Check all that apply. Number Street Contingent Sioux Falls, SD 57108 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify

Personal loan

✓ No

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First Name Middle Name Last Name

Part	2: Your NONPRIORITY Unsecured Claims - Con	tinuation Page	
Afte	listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.33	Peac Solutions Nonpriority Creditor's Name P.O. Box 13604 Number Street Philadelphia, PA 19101 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Business Debt	<u>\$127,640.00</u>
4.34	Privia Medical Group North Texas Nonpriority Creditor's Name PO Box 961205 Number Street Fort Worth, TX 76161-1205 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Medical	<u>\$151.00</u>

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$102.00 4.35 Radiology Associates of North Texas Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? PO Box 1723 As of the date you file, the claim is: Check all that apply. Number Street Contingent Indianapolis, IN 46206-1723 City ZIP Code State Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No Medical ☐ Yes \$6,663.00 4.36 Sallie Mae Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3229 As of the date you file, the claim is: Check all that apply. Number Street Contingent Wilmington, DE 19804 City ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **✓** No

Educational

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First Name Middle Name Last Nam

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** unknown 4.37 Sisemore Law Firm, PC Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? 603 E Belknap Street As of the date you file, the claim is: Check all that apply. Number Street Contingent Fort Worth, TX 76102 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No Attorney for - Christan Torres ☐ Yes \$6,000.00 4.38 **Society Las Olas** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 301 Southwest 1st Ave As of the date you file, the claim is: Check all that apply. Number Street Contingent Fort Lauderdale, FL 33301 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No Lease deficiency

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$103,165.00 4.39 Sun Valley Industrial Park, LP Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 4900 Sun Valley Drive As of the date you file, the claim is: Check all that apply. Number Street Contingent Fort Worth, TX 76102 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify **☑** No **Business Debt** ☐ Yes \$910.00 4.40 SYNCB/PPC Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? PO Box 530975 As of the date you file, the claim is: Check all that apply. Number Street Contingent Orlando, FL 32896 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Delta}$ Other. Specify **✓** No **Credit Card**

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

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First Name Middle Name Last Name

Afte	r listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
4.41	SYNCB/Room To Go Nonpriority Creditor's Name PO Box 965060 Number Street Orlando, FL 32896 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$9,030.00
4.42	Tarrant Neurology Nonpriority Creditor's Name 713 Grainger St Number Street Fort Worth, TX 76104 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical	\$247.00

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$2,597.00 4.43 **TBOM-Genesis Retail** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? PO BOx 4499 As of the date you file, the claim is: Check all that apply. Number Street Contingent Beaverton, OR 97076 City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other. Specify **☑** No **Credit Card** ☐ Yes \$409.00 4.44 **Texas Health Resources** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? By American InfoSource as Agent As of the date you file, the claim is: Check all that apply. P.O. Box 4457 Contingent Number Street ■ Unliquidated Houston, TX 77210-4457 ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts ☐ Check if this claim is for a community debt $\mathbf{\Lambda}$ Other. Specify Is the claim subject to offset? Medical **☑** No

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First Name Middle Name Last Nam

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$349.81 4.45 **Texas Health Resources** Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? By American InfoSource as Agent As of the date you file, the claim is: Check all that apply. P.O. Box 4457 Contingent Number ■ Unliquidated Houston, TX 77210-4457 City State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other At least one of the debtors and another similar debts Check if this claim is for a community debt $\mathbf{\Lambda}$ Other. Specify Is the claim subject to offset? Medical **☑** No Yes unknown 4.46 The Braden Apartments Last 4 digits of account number ____ Nonpriority Creditor's Name When was the debt incurred? 500 Energy Way As of the date you file, the claim is: Check all that apply. Number Street ☐ Contingent Fort Worth, TX 76102 ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ■ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No

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Adrian Page 46 of 59 Modesto

Middle Name First Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$1,836,900.00 4.47 **US Dept of Treasury SBA** Last 4 digits of account number -Nonpriority Creditor's Name When was the debt incurred? P.O. Box 97901 As of the date you file, the claim is: Check all that apply. Number Street Contingent Saint Louis, MO 63197 City ZIP Code State Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\sqrt{}$ Other. Specify **☑** No **Business Debt** ☐ Yes \$68,393.00 4.48

Wide Merchant Capital Nonpriority Creditor's Name 300 Delaware Ave 210	Last 4 digits of account number When was the debt incurred?
Number Street	As of the date you file, the claim is: Check all that apply.
Wilmington, DE 19801	☐ Contingent
City State ZIP Code	Unliquidated
Who incurred the debt? Check one.	☐ Disputed
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
☐ Debtor 2 only	Student loans
☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or
At least one of the debtors and another	divorce that you did not report as priority claims
☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset? ☑ No	Other. Specify Business Debt

Yes

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claim** 6a. Domestic support obligations 6a. \$22,000.00 **Total claims** from Part 1 6b. Taxes and certain other debts you owe the 6b. \$45,913.44 government 6c. Claims for death or personal injury while you 6c. \$0.00 were intoxicated 6d. Other. Add all other priority unsecured claims. 6d \$0.00 Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$67,913.44 **Total claim** 6f. Student loans 6f. \$6,663.00 **Total claims** from Part 2 6g. Obligations arising out of a separation \$0.00 6g. agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and 6h. \$0.00 other similar debts 6i. Other. Add all other nonpriority unsecured 6i. \$3,123,925.81 claims. Write that amount here. 6j. Total. Add lines 6f through 6i. 6j. \$3,130,588.81

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Fill in this information	to identify your case:				
Debtor 1	Adrian	Modesto	Torres		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of Texas					
Case number (if known)		M-7			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Pioneer 303 Investments Name 2026 W Pioneer Pkwy C1 Number Street Arlington, TX 76012 City State ZIP Code	Business Lease Contract to be ASSUMED
2.2	The Braden Apartments Name 500 Energy Way Number Street Fort Worth, TX 76102 City State ZIP Code	Apartment Lease Contract to be REJECTED
2.3	Name Number Street City State ZIP Code	- - -
2.4	Name Number Street City State ZIP Code	- -

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				Document	Page 49 of 5	9	
Fill i	n this informatior	to identify your ca	ase:				
De	btor 1	Adrian	Modesto	Torres			
		First Name	Middle Name	Last Name			
-	btor 2 ouse, if filing)						
(Ορ	ouse, ir illing)	First Name	Middle Name	Last Name			
Un	ited States Bankı	ruptcy Court for the	e:	Northern District	of Texas		
	se number known)	23-41966-	-MXM-7				Check if this is an amended filing
	icial Form					_	
Sc	<u>hedule F</u>	H: Your C	odebtors				12/15
	y question. Do you have a √ No Yes	ny codebtors? (If	you are filing a joint	case, do not list ei	ther spouse as a code	btor.) btory property states and territor	
	Idaho, Louisiar	na, Nevada, New N	Mexico, Puerto Rico,	• • • •	• \	my property states and termen	oo morado / mzona, odinorna,
	☑ No. Go to lir						
	′	ur spouse, former	spouse, or legal equ	ivalent live with yo	ou at the time?		
	☐ No ☐ Yes. In w	hich community s	tate or territory did v	ou live?		Fill in the name and current	address of that person.
			iaic or ionnery and y	ouo.			address or that personn
	Name					_	
	Number	Street				_	
	City		State ZIP Cod	le		_	
3.	again as a cod	ebtor only if that	person is a guaranto	or or cosigner. Ma	ke sure you have liste	oouse is filing with you. List the dath creditor on Schedule D Schedule E/F, or Schedule G to	(Official Form 106D),
	Column 1: Your	codebtor				Column 2: The creditor to who	m you owe the debt
						Check all schedules that app	ly:

Name

Number

City

Street

ZIP Code

State

☐ Schedule D, line —

☐ Schedule E/F, line _____

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			Document	1 agc 30 01 33	
Fill in this information	on to identify your case	e:			
Debtor 1	Adrian	Modesto	Torres		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		Check if this is:
United States Ban	kruptcy Court for the:		Northern District of	Texas	An amended filing
Case number (if known)	23-41966-M	XM-7			☐ A supplement showing postpetition chapter 13 income as of the following date
					MM / DD / YYYY
Official Forn	n 106l				

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with	Employment status	☑ Employed □ Not Employed	☐ Employed ☐ Not Employed
information about additional employers.	Occupation	Owner/Operator	
Include part time, seasonal, or	Employer's name	Metroplex Recovery, LLC	
self-employed work. Occupation may include student	Employer's address	2003 W Arkansas Lane Number Street	Number Street
or homemaker, if it applies.			
		Arlington, TX 76013	
	How long employed there?	City State Zip Code ? 12 years	City State Zip Code
rt 2: Give Details About Mon	nthly Income		
unless you are separated. If you or your non-filing spouse ha	ave more than one employer, c		\$0 in the space. Include your non-filing spour that person on the lines below. If you need
unless you are separated. If you or your non-filing spouse ha	ave more than one employer, c		
unless you are separated. If you or your non-filing spouse ha more space, attach a separate sh List monthly gross wages, salary	ave more than one employer, called to this form. y, and commissions (before all	For Debtor 1	For Debtor 2 or
unless you are separated.	ave more than one employer, of the tothis form. y, and commissions (before all calculate what the monthly wag	For Debtor 1	r that person on the lines below. If you need For Debtor 2 or non-filing spouse

Case 23-41966-mxm7 Doc 25 Filed 08/01/23 Entered 08/01/23 17:53:43 Desc Main Page 51 of 59 Document Debtor 1 **Torres** Case number (if known) 23-41966-MXM-7 **Adrian** Modesto First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here..... \$0.00 \$0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans \$0.00 \$0.00 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$0.00 \$0.00 \$0.00 5h. 5h. Other deductions. Specify: _ Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 \$0.00 7. \$0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$7,000.00 monthly net income. 8a. \$0.00 \$0.00 \$0.00 8b. Interest and dividends 8h. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 \$0.00 8d. Unemployment compensation \$0.00 \$0.00 8d. 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$0.00 \$0.00 Specify: 8f. 8g. Pension or retirement income 8g. \$0.00 \$0.00 \$0.00 \$0.00 8h. Other monthly income. Specify: 8h.

11. State all other regular contributions to the expenses that you list in Schedule J.

Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse

Calculate monthly income. Add line 7 + line 9.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

	Specify:	11. 🛨 _	\$0.00
2	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that	Г	

10.

\$7.000.00

\$7,000.00

Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$7,000.00 Combined

\$0.00

monthly income

\$7,000,00

Do you expect an increase or decrease within the year after y	you file this form?
---	---------------------

☐ No.	Debtor anticipates slightly higher income from self-employment.
Non Fundain	Desici antiopates signify higher moone from set employment.
Yes. Explain:	

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Debtor 1 Modesto **Torres** Case number (if known) 23-41966-MXM-7 **Adrian** First Name Middle Name Last Name 8a. Attached Statement **Business Income** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$7,000.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 Other Expenses TOTAL OTHER EXPENSES \$0.00 \$0.00 4. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$7,000.00

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		Documer	nt Page 53 of 59		
Fil	I in this information to identify	your case:			
D	Debtor 1 Adrian First Nam	Modesto Torres e Middle Name Last Name		Check if this is:	
1	Debtor 2 Spouse, if filing) First Nam	e Middle Name Last Name	3	An amended filingA supplement show expenses as of the	ving postpetition chapter 13 following date:
U	Inited States Bankruptcy Court	for the: Northern Dist	trict of Texas		<u> </u>
	case number 23-	41966-MXM-7		MM / DD / YYYY	
	fficial Form 106J				
So	chedule J: You	r Expenses			12/15
spa		possible. If two married people are filing sheet to this form. On the top of any ad sehold			
	No. Go to line 2. Yes. Does Debtor 2 live in No Yes. Debtor 2 m	n a separate household? nust file Official Form 106J-2, Expenses t	for Separate Household of Debt	or 2.	
2.	Do you have dependents? Do not list Debtor 1 and Debtor 2.	✓ No ☐ Yes. Fill out this information for each dependent		o Dependent's age	Does dependent live with you?
	Do not state the dependents names.	·			— □No. □Yes.
					— □ No. □ Yes.
					— No. ☐ Yes.
					No. ☐ Yes.
					No. ☐ Yes.
3.	Do your expenses include expenses of people other th yourself and your depender				
Pa	art 2: Estimate Your Ong	joing Monthly Expenses			
		our bankruptcy filing date unless you a d. If this is a supplemental <i>Schedule J</i> ,		-	
	•	non-cash government assistance if you ded it on <i>Schedule I: Your Income</i> (Offic		Y	our expenses
4.	The rental or home ownersh	nip expenses for your residence. Include	e first mortgage payments and	any rent 4	\$2 100 00

such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$2,100.00

If not included in line 4:

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. \$0.00

4d. \$0.00

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Debtor 1 Adrian Modesto Torres Case number (if known) 23-41966-MXM-7
First Name Middle Name Last Name

	Yo	ur expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
5. Utilities:		
6a. Electricity, heat, natural gas	6a. <u>—</u>	\$200.00
6b. Water, sewer, garbage collection	6b	\$50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$100.00
6d. Other. Specify: Internet	6d	\$50.00
Food and housekeeping supplies	7	\$500.00
. Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$150.00
Personal care products and services	10.	\$150.00
Medical and dental expenses	11	\$300.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$618.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$200.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. —	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$350.00
15d. Other insurance. Specify:	15d	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$0.00
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$2,099.37
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18	\$0.00
19. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	tor 1	Adrian	Modesto	Torres	Case number	(if known) 23-41966-MXM-7
		First Name	Middle Name	Last Name		
21.	Other. Spe	cify:			21.	+\$0.00
22.	Calculate y	our monthly exp	enses.			
	22a. Add li	nes 4 through 21.			22a.	\$6,867.37
	22b. Copy	line 22 (monthly e	expenses for Debtor 2),	if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add lii	ne 22a and 22b. T	he result is your month	ly expenses.	22c.	\$6,867.37
23.	Calculate y	our monthly net	income.			
	23а. Сору	line 12 (your com	bined monthly income)	from Schedule I.	23a.	\$7,000.00
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b.	- \$6,867.37_
	23c. Subtract your monthly expenses from your monthly income.					
	The re	esult is your <i>mont</i>	hly net income.		23c.	\$132.63
24.	Do you ex	pect an increase	or decrease in your exp	enses within the year after you f	ile this form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					
	☑ No. ☐ Yes.	None				

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Debtor 1 Adrian Modesto Torres		Torres	Case number (if known) 23-41966-MXM-7
First Name	Middle Name	Last Name	
			Amount
rtation: gas, mainte	nance, bus or train far	e	
			\$433.00
50, Maintenance 85	, Tires 50		\$185.00
	First Name rtation: gas, mainte	First Name Middle Name	First Name Middle Name Last Name rtation: gas, maintenance, bus or train fare

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Fill in this informatio	Fill in this information to identify your case:					
Debtor 1	Adrian	Modesto	Torres			
	First Name	Middle Name	Last Name			
Debtor 2	-					
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:		Northern District of Texa	s		
Case number 23-41966-MXM-7 (if known)		<u>M-7</u>				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Part 1: Summarize Your Assets	
1a. Copy line 55, Total real estate, from Schedule A/B		
1b. Copy line 62, Total personal property, from Schedule A/B		\$0.00
1c. Copy line 63, Total of all property on Schedule A/B	1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	ψ0.00
Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	1b. Copy line 62, Total personal property, from Schedule A/B	\$110,846.78
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	1c. Copy line 63, Total of all property on Schedule A/B	\$110,846.78
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Part 2: Summarize Your Liabilities	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$211,785.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	· · · · · · · · · · · · · · · · · · ·	\$67,913.44
Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		+ \$3,130,588.81
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I. 5. Schedule J: Your Expenses (Official Form 106J)	Your total liabilities	\$3,410,287.25
Copy your combined monthly income from line 12 of <i>Schedule I</i>	Part 3: Summarize Your Income and Expenses	
	· · · · · · · · · · · · · · · · · · ·	\$7,000.00
		\$6,867.37

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Debtor 1 <u>Adrian</u> Modesto Torres Case number (if known) 23-41966-MXM-7

Last Name

First Name

Middle Name

Pa	Answer These Questions for Administrative and Statistical Records				
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes				
	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U Your debts are not primarily consumer debts. You have nothing to report on this part of the form this form to the court with your other schedules.	J.S.C. § 159.			
	from the Statement of Your Current Monthly Income: Copy your total current monthly income from form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	Official			
9. C	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim			
	From Part 4 on Schedule E/F, copy the following:				
	9a. Domestic support obligations (Copy line 6a.)				
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)				
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)				
	9d. Student loans. (Copy line 6f.)				
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)				
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+			
	9g. Total . Add lines 9a through 9f.				

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Fill in this information to identify your case:				
Debtor 1	Adrian	Modesto	Torres	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:		Northern District of Texas	
Case number (if known)	23-41966-MX	<u>(M-7</u>		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help y	ou fill out bankruptcy forms?
☑No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary and sc	hedules filed with this declaration and that they are true and correct.
V	
/s/ Adrian Modesto Torres	
Adrian Modesto Torres, Debtor 1	
Date <u>07/26/2023</u>	
MM/ DD/ YYYY	